

PART B - FEE(S) TRANSMITTAL

Complete and mail this form, together with applicable fee(s), to:

Mail Stop Issue Fee
Commissioner for Patents
P.O. Box 1450
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CERTIFICATE OF ELECTRONIC FILING

HICKMAN PALERMO TRUONG & BECKER, LLP
 2055 GATEWAY PLACE
 SUITE 550
 SAN JOSE, CA 95110

I hereby certify that this Fee(s) Transmittal is being filed Via Electronically
 on the date indicated below and addressed to:
 Commissioner for Patents, Alexandria, VA 22313-1450

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/820,980 | 04/07/2004 | Amol Khare | 50325-0892 | 9036 |

TITLE OF INVENTION: METHOD AND APPARATUS FOR PREVENTING NETWORK ATTACKS BY AUTHENTICATING INTERNET CONTROL MESSAGE PROTOCOL PACKETS

| TOTAL CLAIMS | APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|--------------|----------------|--------------|-----------|-----------------|------------------|------------|
| 36 | nonprovisional | NO | \$1510 | \$300 | \$1810 | 12/04/2009 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|---------------|----------|----------------|
| Shin Hon Chen | 2431 | 726-013000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Change of Correspondence address or Change of Correspondence Address form PTO/SB/122 attached.

1 Hickman Palermo Truong & Becker LLP

"Fee Address" indication (or "Fee Address" Indication form PTO/SB47) attached.

2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Cisco Technology, Inc.

San Jose, CA

Please check the appropriate assignee category or categories (will not be printed on the patent) individual corporation or other private group entity government

4a. The following fees are enclosed:

4b. Payment of Fee(s):

Issue fee A check in the amount of the fees is enclosed.

Publication Fee Payment by credit card is authorized.

Advance Order - # of Copies _____ The Commissioner is authorized to charge deficiencies / credit overpayments to Deposit Acct. 10-1302

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee and Publication Fee (if any or to re-apply any previously paid issue fee to the application identified above).

(Authorized Signature)

(Date)

/Eric L Sutton#61173/

12/2/09

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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